Freedom Mortgage PO Box 6656 Chicago, IL 60680-6656

KML Law Group, P.C. 701 Market St Ste 5000 Philadelphia, PA 19106-1541

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF PENNSYLVANIA, PITTSBURGH DIVISION	<u> </u>	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

06/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	About Debtor 2 (Spouse Only in a Jo	
1.	Your full name				
	Write the name that is on	Carol			
	your government-issued picture identification (for	First name	First name	First name	
	example, your driver's	Anne			
	license or passport).	Middle name	Middle name	Middle name	
	Bring your picture identification to your meetin	, Vicker		_	
	with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years				
	Include your married or maiden names.				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6860			

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)  EIN
<b>5</b> .	Where you live		If Debtor 2 lives at a different address:
		3030 Hillcrest Rd Bethel Park, PA 15102-1210  Number, Street, City, State & ZIP Code  Allegheny  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Ch	apter 7					
		☐ Ch	apter 11					
		☐ Ch	apter 12					
		☐ Ch	apter 13					
8.	How you will pay the fee	— 1	about how yo	u may pay. Typically, if ey is submitting your pa	you are paying the fee yours	with the clerk's office in your local court for more details elf, you may pay with cash, cashier's check, or money ordettorney may pay with a credit card or check with a		
						sign and attach the Application for Individuals to Pay The		
			J	<i>Installments</i> (Official Fo I <b>t my fee be waived</b> (Y	,	only if you are filing for Chapter 7. By law, a judge may, but		
			not required your family s	o, waive your fee, and r ze and you are unable t	nay do so only if your income	e is less than 150% of the official poverty line that applies to . If you choose this option, you must fill out the <i>Application</i>		
<b>)</b> .	Have you filed for bankruptcy within the last 8 years?	■ No.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by	■ No						
	an affiliate?		Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
	Do you rent your	■ No.	Go to	ine 12.				
11.	residence?	☐ Yes	. Has y	our landlord obtained a	n eviction judgment against	you?		
11.								
11.				No. Go to line 12.  Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file bankruptcy petition.				

	otor 1 Vicker, Carol Ann	е		Case number (if known)
Par	t 3: Report About Any Bu	sinesses \	fou Own	as a Sole Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No. Go to Part 4.		Part 4.
		☐ Yes.	Name	and location of business
	A sole proprietorship is a			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	er, Street, City, State & ZIP Code
	to this petition.		Check	k the appropriate box to describe your business:
				Health Care Business (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defined in 11 U.S.C. § 101(53A))
				Commodity Broker (as defined in 11 U.S.C. § 101(6))
				None of the above
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	hapter 11 of the ankruptcy Code, and are choosing to proceed under Subchapter V, you must statement, and federal income tax return or if any of statement and statement		iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.		iling under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I c loose to proceed under Subchapter V of Chapter 11.
		☐ Yes.		iling under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I e to proceed under Subchapter V of Chapter 11.
Par	t 4: Report if You Own or		choose	
	Do you own or have any		choose	e to proceed under Subchapter V of Chapter 11.
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	Have Any	choose <b>Hazardo</b> u	e to proceed under Subchapter V of Chapter 11.
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable	Have Any	Choose  Hazardou  What is t	e to proceed under Subchapter V of Chapter 11.  us Property or Any Property That Needs Immediate Attention
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs	Have Any	What is t	e to proceed under Subchapter V of Chapter 11.  us Property or Any Property That Needs Immediate Attention  the hazard?  liate attention is

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

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I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Vicker, Carol Ann	е		Case	number (if known)		
Part	6: Answer These Questi	ons for Repor	ting Purposes				
16.	What kind of debts do you have?		e your debts primarily consultividual primarily for a personal,		sumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an old purpose."		
			No. Go to line 16b.				
			Yes. Go to line 17.				
				ess debts? Business debts are cough the operation of the busine	debts that you incurred to obtain mor ss or investment.	ney	
			No. Go to line 16c.				
			Yes. Go to line 17.				
		16c. St	ate the type of debts you owe that	at are not consumer debts or bus	siness debts		
17.	Are you filing under Chapter 7?	□ No. Ia	m not filing under Chapter 7. G	to to line 18.			
	Do you estimate that after any exempt property is excluded and			u estimate that after any exempt distribute to unsecured creditors	property is excluded and administrati ?	ive expenses are	
	administrative expenses are paid that funds will be		No				
	available for distribution to unsecured creditors?		Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	□ \$0 - \$50,0 □ \$50,001 - ■ \$100,001 □ \$500,001	\$100,000 - \$500,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	n	10 billion \$50 billion	
20.	How much do you estimate your liabilities to be?	□ \$0 - \$50,0 □ \$50,001 ■ \$100,001 □ \$500,001	- \$100,000 - \$500,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	n 🗖 \$10,000,000,001 -	\$10 billion \$50 billion	
Part	7: Sign Below						
For	you	I have examin	ned this petition, and I declare un	nder penalty of perjury that the in	formation provided is true and correct	ot.	
				m aware that I may proceed, if e under each chapter, and I choos	ligible, under Chapter 7, 11,12, or 1 se to proceed under Chapter 7.	3 of title 11, United	
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request reli	ef in accordance with the chapt	ter of title 11, United States Cod	e, specified in this petition.		
		case can res /s/ Carol A	ult in fines up to \$250,000, or im .nne Vicker	nprisonment for up to 20 years, o	ey or property by fraud in connection r both. 18 U.S.C. §§ 152, 1341, 151		
		Carol Ann Signature of		Signature of	Debtor 2		
		Executed on	July 25, 2022 MM / DD / YYYY	Executed on	MM / DD / YYYY		

Debtor 1 Vicker, Carol Ann	ne	Case number (if known)		
For your attorney, if you are represented by one	Chapter 7, 11, 12, or 13 of title 11, United State	es Code, and have explained	ormed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the ce required by 11 U.S.C. § 342(b) and, in a case in	
If you are not represented by an attorney, you do not need to file this page.			ry that the information in the schedules filed with the	
. •	/s/ Richard W. Schimizzi	Date	July 25, 2022	
	Signature of Attorney for Debtor		MM / DD / YYYY	
	Richard W. Schimizzi			
	Schimizzi Law, LLC			
	Firm name			
	35 West Pittsburgh Street Greensburg, PA 15601 Number, Street, City, State & ZIP Code			
	Contact phone (724) 838-9722	Email address	rws@schimizzilaw.com	

Contact phone **(724) 838-9722** 

32573 PA Bar number & State

	nis information to iden	tify your case a	and thi	is filing:			
Debtor 1	Carol Anne Vicl						
Debtor 2	First Name	Middle N	lame	Last Name	1		
(Spouse, if filing)	First Name	Middle N	lame	Last Name			
United States Ba	ankruptcy Court for the:		)ISTRI	ICT OF PENNSYLVANIA, PITTSBURGH			
Case number _							☐ Check if this is an amended filing
Official Fo	orm 106A/B						
	le A/B: Pro	pertv					12/15
think it fits best. B information. If more Answer every ques	Be as complete and accur re space is needed, attac stion. Each Residence, Buildir	rate as possible. I h a separate shee ng, Land, or Othe	If two net to thi	only once. If an asset fits in more than one of married people are filing together, both are events form. On the top of any additional pages, we Estate You Own or Have an Interest In ence, building, land, or similar property?	qually respor	sible for sup	plying correct
□ No. Go to Par ■ Yes. Where is	rt 2. is the property?						
1.1			What	is the property? Check all that apply			
3030 Hillo Street address,	crest Rd , if available, or other description	on		Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	of any secured	ims or exemptions. Put d claims on <i>Schedule D:</i> as Secured by Property.
Bethel Pa	ark PA 15	5102-1210 ZIP Code		Manufactured or mobile home  Land  Investment property	Current val entire prope		Current value of the portion you own?
City			_			-,	<b>3170.400.00</b>
City			_	Other Check one	(such as fe a life estate	e simple, tena e), if known.	\$170,400.00 our ownership interest ancy by the entireties, or
·	V		Who I	Other has an interest in the property? Check one Debtor 1 only	(such as fe	e simple, tena e), if known.	our ownership interest
Allegheny County	у		Who I	Otherhas an interest in the property? Check one	(such as fer a life estate Fee Simp	e simple, tend e), if known. ole	our ownership interest
Allegheny	у		Who i	Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Fee Simp  Check (see inst	e simple, tense), if known.  Ole  if this is compructions)	our ownership interest ancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Deb	tor 1 <u>V</u>	icker, Carol Anne		Case number (if known)	
3. <b>C</b> a	ars, vans,	trucks, tractors, sport utili	ty vehicles, motorcycles		
	No				
_	Yes				
3.1	Make:	Dodge	Who has an interest in the property? Check one	Do not deduct sec	cured claims or exemptions. Put
	Madal	Caravan/Grand	Debtor 1 only	the amount of any	secured claims on Schedule D: ve Claims Secured by Property.
	Model: Year:	Caravan 2WD 2005	Debtor 2 only		
		nate mileage:	Debtor 2 only	Current value of entire property?	the Current value of the portion you own?
		ormation:	☐ At least one of the debtors and another		
				¢EO	0.00 ¢500.00
			☐ Check if this is community property (see instructions)	\$500	0.00 \$500.00
4. W	atercraft.	aircraft, motor homes, ATV	s and other recreational vehicles, other vehicles, a	nd accessories	
			al watercraft, fishing vessels, snowmobiles, motorcycle a		
_					
	No				
	Yes				
			u own for all of your entries from Part 2, including a at number here		\$500.00
.,	ou nave e	attaoned for Fart 2. Write the			
Part	3: Descri	be Your Personal and Househ	old Items		
			le interest in any of the following items?		Current value of the
-		, , ,	•		portion you own?
					Do not deduct secured claims or exemptions.
		goods and furnishings			, , , , , , , , , , , , , , , , , , ,
_	: <i>xamples:</i>   ] No	Major appliances, furniture, lir	nens, china, kitchenware		
	Yes. De	scriba			
	- 103. DC		furniture, furnishings, and major appliances	<u> </u>	\$7,500.00
		Trodoction	Tarricard, rarricaringo, and major applianed		<u> </u>
- <b>-</b>					
	ectronics xamples:		video, stereo, and digital equipment; computers, printers	s. scanners: music collec	ctions: electronic devices
		including cell phones, camer		,	,
	No				
	Yes. De	scribe			
8. <b>C</b>	ollectibles	s of value			
	xamples:	Antiques and figurines; paintir	ngs, prints, or other artwork; books, pictures, or other art	objects; stamp, coin, or	baseball card collections; other
	_	collections, memorabilia, col	lectibles		
_	No	21			
L	Yes. De	scribe			
		for sports and hobbies			
Е			e, and other hobby equipment; bicycles, pool tables, golf	clubs, skis; canoes and	kayaks; carpentry tools; musical
	No	instruments			
_	■ NO ] Yes. De	scriba			
_	⊒ 163. De	SUIDG			
	Firearms	Distala villa a di c	and the second and the second second		
_		Pistois, ritles, shotguns, am	munition, and related equipment		
	I No I Yes. De	scriba			
	⊒ 165. De	3011DC			

Debto	or 1 Vicker, Carol Anne	<u> </u>		Case number (if known)	
_	Examples: Everyday clothes, fur	s, leather coats, designer w	ear, shoes, accessories		
	No Yes. Describe				
	<i>xamples:</i> Everyday jewelry, cos No	stume jewelry, engagement r	ings, wedding rings, heirloom jewelr	y, watches, gems, gold, si	ilver
	Yes. Describe				
_E	on-farm animals Examples: Dogs, cats, birds, hou No	rses			
	Yes. Describe				
	ny other personal and housel No Yes. Give specific information.	•	eady list, including any health aid	ds you did not list	
	Add the dollar value of all of y Part 3. Write that number her	•	ncluding any entries for pages yo	ou have attached for	\$7,500.00
Part 4	: Describe Your Financial Asse	ets			
Do yo	ou own or have any legal or e	quitable interest in any o	f the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
17. <b>D</b> e	Examples: Money you have in yo	· · · · · · · · · · · · · · · · · · ·			
_	institutions. If you ha		ertificates of deposit; shares in credi he same institution, list each.	t unions, brokerage house	es, and other similar
■	No Yes		Institution name:		
	17.1.	Checking Account	PNC Bank		\$2,100.00
	onds, mutual funds, or public examples: Bond funds, investmen		firms, money market accounts		
	No Yes	Institution or issuer name:			
jc	on-publicly traded stock and oint venture	interests in incorporated	and unincorporated businesses,	including an interest in	an LLC, partnership, and
	Yes. Give specific information	about them		% of ownership:	
_^	<i>legotiable instrument</i> s include p	personal checks, cashiers' c	and non-negotiable instruments hecks, promissory notes, and mone someone by signing or delivering th		
	Yes. Give specific information a	about them suer name:			
	•		thrift savings accounts, or other pe	nsion or profit-sharing pla	ans

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Vicker, Car	ol Anne	Case number (if known)				
	☐ Yes. L	ist each accour	nt separately.  Type of account:	Institution name:				
22.	Your sh	y deposits and nare of all unuse les: Agreements	ed deposits you have made so that you	u may continue service or use from a company tilities (electric, gas, water), telecommunications companies, or	others			
				Institution name or individual:				
23.	Annuitie ■ No	es (A contract fo	or a periodic payment of money to you	, either for life or for a number of years)				
	☐ Yes	Is	ssuer name and description.					
24.			on IRA, in an account in a qualified 529A(b), and 529(b)(1).	d ABLE program, or under a qualified state tuition program	n.			
	☐ Yes	☐ Yes						
25.	Trusts, ■ No	equitable or fu	ture interests in property (other th	aan anything listed in line 1), and rights or powers exercis	able for your benefit			
	☐ Yes.	Give specific in	formation about them					
	Example No	les: Internet don	rademarks, trade secrets, and othe nain names, websites, proceeds from oformation about them					
	Example ■ No	les: Building per	and other general intangibles rmits, exclusive licenses, cooperative a	association holdings, liquor licenses, professional licenses				
М	oney or p	property owed	to you?		Current value of the			
			·		portion you own? Do not deduct secured claims or exemptions.			
28.	Tax refu ■ No	unds owed to y	<b>rou</b>					
	☐ Yes. (	Give specific info	ormation about them, including whether	er you already filed the returns and the tax years				
29.	■ No	les: Past due or		, child support, maintenance, divorce settlement, property set	tlement			
	☐ Yes. (	Give specific info	ormation					
30.	Examp			sability benefits, sick pay, vacation pay, workers' compensation	, Social Security benefits;			
	■ No □ Yes.	Give specific inf	formation					
31.		es in insurance les: Health, disa		account (HSA); credit, homeowner's, or renter's insurance				
	☐ Yes. N	Name the insura	ance company of each policy and list it Company name:	ts value. Beneficiary:	Surrender or refund			
			company name.	Bononolal y.	value:			
32.			rty that is due you from someone w ry of a living trust, expect proceeds fro	who has died om a life insurance policy, or are currently entitled to receive pro	perty because someone has			

Official Form 106A/B Schedule A/B: Property page 4

■ No

Debt	or 1	Vicker, Carol Anne		Case number (if known)	
	Yes.	Give specific information		_	
		against third parties, whether or not you have filed a law les: Accidents, employment disputes, insurance claims, or ri		d for payment	
_	No		ge te eue		
	Yes.	Describe each claim			
	<b>ther c</b> No	ontingent and unliquidated claims of every nature, inclu	ding counterclaims of	the debtor and rights to set	off claims
_		Describe each claim			
35. <b>A</b>	ny fin	ancial assets you did not already list			
	No				
Ц	Yes.	Give specific information			
		he dollar value of all of your entries from Part 4, including. Write that number here			\$2,100.00
Part 5	Des	scribe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	te in Part 1.	
37. <b>D</b> o	you o	own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go	to Part 6.			
	Yes. G	so to line 38.			
Part 6		scribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	ı Own or Have an Interes	t In.	
_		own or have any legal or equitable interest in any farm-	or commercial fishing	-related property?	
_	_	Go to Part 7.			
L		Go to line 47.			
Part 7	<b>7</b> :	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
		have other property of any kind you did not already list?	?		
_	-xamp No	ies. Season tickets, country dub membership			
	Yes.	Give specific information			
54.	Add tl	he dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
				<u></u>	
Part 8	B:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$170,400.00
56.	Part 2	: Total vehicles, line 5	\$500.00		
57.	Part 3	: Total personal and household items, line 15	\$7,500.00		
58.	Part 4	: Total financial assets, line 36	\$2,100.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$10,100.00	Copy personal property total	\$10,100.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$180,500.00

	Fill in this	information to identif	y your case:								
De	btor 1	Carol Anne Vicke	r								
_		First Name	Middle Name	L	Last Name						
	btor 2 ouse if, filing)	First Name	Middle Name	L	Last Name						
Un	ited States Ban	kruptcy Court for the:	WESTERN DISTRICT OF P	ENNS	SYLVANIA, PITTSBURGH						
Ca	se number										
	nown)					☐ Check if this is an amended filing					
O	fficial For	m 106C									
S	chedule	e C: The Pro	pperty You Cla	im	as Exempt	4/22					
prop out	perty you listed o	on Schedule A/B: Prope	rty (Official Form 106A/B) as yo	ur sou	urce, list the property that you claim a	pplying correct information. Using the as exempt. If more space is needed, fill is, write your name and case number (if					
spe app fun- to a	cific dollar am dicable statuto ds—may be ur	ount as exempt. Alterr ry limit. Some exempti ilimited in dollar amou lar amount and the val	atively, you may claim the fu ons—such as those for healt nt. However, if you claim an e	II fair h aid exem	s, rights to receive certain benefit	ng exempted up to the amount of any ts, and tax-exempt retirement under a law that limits the exemption					
Pa	rt 1: Identify	the Property You Cla	im as Exempt								
1.	Which set of	exemptions are you cla	aiming? Check one only, even	if you	ır spouse is filing with you.						
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)										
	_	· ·	s. 11 U.S.C. § 522(b)(2)								
2				nne f	iill in the information below						
۷.		For any property you list on Schedule A/B that you claim as exempt, fill in the information below.				Charitia laws that allow avamation					
		on of the property and line hat lists this property	c on Current value of the portion you own  Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption					
	Dodge	and Caravan 2WD	\$500.00		\$500.00	11 USC § 522(d)(2)					
	2005 Line from Scho				100% of fair market value, up to any applicable statutory limit						
	Household and major a	furniture, furnishin	gs, \$7,500.00		\$7,500.00	11 USC § 522(d)(3)					
	Line from Scho				100% of fair market value, up to any applicable statutory limit						
	PNC Bank	edule A/B. <b>17.1</b>	\$2,100.00		\$1,325.00	11 USC § 522(d)(5)					
	Line nom con	oddio 702 IIII			100% of fair market value, up to any applicable statutory limit						
	PNC Bank	edule A/B <b>17.1</b>	\$2,100.00		\$775.00	11 USC § 522(d)(5)					
	LING HOIH SCH	Court AVD. 17.1			100% of fair market value, up to any applicable statutory limit						
3.	(Subject to adj ■ No	ustment on 4/01/25 and	nption of more than \$189,050' every 3 years after that for case covered by the exemption within	s filed	d on or after the date of adjustment.)						

Official Form 106C

☐ No

Debtor 1	Vicker, Carol Anne	Case number (if known)	
	□ Yes		

Fill	in this information to iden	tify your case:				
Debtor 1	Carol Anne Vic		lomo			
Debtor 2	First Name	Middle Name Last N	iame		1	
(Spouse if, filing	g) First Name	Middle Name Last N	lame			
		WESTERN DISTRICT OF PENNSYLV	VANIA	, PITTSBURGH		
United State	es Bankruptcy Court for the	DIVISION				
Case numb	er					
(if known)						neck if this is an
					ai	nended filing
Official F	Form 106D					
Sched	ule D: Creditors	s Who Have Claims Sec	ure	d by Property	y	12/15
needed, copy known).		If two married people are filing together, both it, number the entries, and attach it to this form				
		nis form to the court with your other schedule	s. You	have nothing else to rer	oort on this form.	
_	Fill in all of the information b	•				
	List All Secured Claims					
		more than one secured claim, list the creditor sep	arately	Column A	Column B	Column C
for each clair	n. If more than one creditor has	s a particular claim, list the other creditors in Part ical order according to the creditor 's name.		Amount of claim Do not deduct the value of collateral.	Value of collatera that supports this claim	
	dom Mortgage	Describe the property that secures the claim	n:	\$367,958.00	\$170,400.	
Creditor	's Name	3030 Hillcrest Rd, Bethel Park, PA 15102-1210	4			
_	ox 6656 ago, IL 60680-6656	As of the date you file, the claim is: Check all apply.  Contingent	I that			
	, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed				
_	the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1	•	<ul> <li>An agreement you made (such as mortgage car loan)</li> </ul>	e or se	cured		
	and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)			
	ne of the debtors and another	☐ Judgment lien from a lawsuit	,			
	this claim relates to a nity debt	Other (including a right to offset)				
Date debt wa	•	Last 4 digits of account number	4085			
— Cate debt w	00/23/2010		4003			
	=	lumn A on this page. Write that number here:		\$367,958	.00	
Write that no		ne dollar value totals from all pages.		\$367,958	.00	
Part 2: Li	st Others to Be Notified fo	r a Debt That You Already Listed				
Use this pag trying to col than one cre	je only if you have others to b lect from you for a debt you c	oe notified about your bankruptcy for a debt th owe to someone else, list the creditor in Part 1 t you listed in Part 1, list the additional credito	, and t	hen list the collection age	ency here. Similarly	, if you have more
	ne, Number, Street, City, State	& Zip Code	On wh	ich line in Part 1 did you er	nter the creditor?	<u>.1</u>
	L Law Group, P.C. Market St Ste 5000		l ast 4	digits of account number	4085	

Official Form 106D

Philadelphia, PA 19106-1541

Fill in this inf	ormation to identify yo	ur case:		
Debtor 1	Carol Anne Vicke	er		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (	DF PENNSYLVANIA, PITTSBURG	SH
Case number (if known)				☐ Check if this is
,				amended filin

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

- 1. Do any creditors have priority unsecured claims against you?
  - No. Go to Part 2
  - ☐ Yes.

#### Part 2: List All of Your NONPRIORITY Unsecured Claims

- 3. Do any creditors have nonpriority unsecured claims against you?
  - No. You have nothing to report in this part. Submit this form to the court with your other schedules.
  - ☐ Yes.

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
				·	
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	0.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	0.00

**Total Claim** 

Fill in th					
Debtor 1	Carol Anne Vicke	er			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF PENNSYLVANIA, PITTSBUI	RGH	
Case number (if known)					☐ Check if this is ar
					amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number,	whom you have the Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				<del>_</del>
	Number	Street			<del>_</del>
	City		State	ZIP Code	<del></del>
2.2					<u></u>
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	<del>_</del>
2.4	U.I.J			2 0000	
	Name				<del>_</del>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5			• • • • • • • • • • • • • • • • • • • •	0000	
-	Name				<del>_</del>
	Number	Street			<u> </u>
	City		State	ZIP Code	<del>_</del>

Fi	II in this information to ident	ifv vour case:			
Debtor 1	Carol Anne Vick	Middle Name	Last Name		
Debtor 2				[	
(Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT OF DIVISION	OF PENNSYLVANIA, PI	rtsburgh	
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
		labtana			
Sched	lule H: Your Cod	leptors			12/15
case numb	per (if known). Answer every you have any codebtors? (If	question.			litional Pages, write your name and
⊔ Yes	5				
	hin the last 8 years, have yournia, Idaho, Louisiana, Nevada				states and territories include Arizona,
■ No.	. Go to line 3.				
	s. Did your spouse, former spou	use, or legal equivalent live w	ith you at the time?		
			•		
line 2	again as a codebtor only if to Schedule E/F (Official Form	hat person is a guarantor	or cosigner. Make sure	you have listed the cr	vith you. List the person shown in editor on Schedule D (Official Form e E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	
<u> </u>	Name			_ ☐ Schedule E/F, li	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			Schedule E/F, li	
				☐ Schedule G, line	
-	Number Chart			_	
	Number Street City	State	ZIP Code		

Fill	in this information to identify your case	se:								
Del	otor 1 Carol Anne \	/icker			_					
_	otor 2				_					
Uni	ted States Bankruptcy Court for the:	WESTERN DISTRICT PITTSBURGH DIVISI		VANIA,	_					
	se number nown)		-			□ A		d filing	g postpetition o	chapter 13
0	fficial Form 106I					M	M / DD/ Y	YYY		
S	chedule I: Your Inco	me								12/15
spo atta	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. On the control of th	spouse is not filing with	h you, do not ir	nclude informa	ation	about y	our spou ber (if kn	se. If mor own). Ans	e space is ne	eded,
	If you have more than one job,		☐ Employed				☐ Emple		mig opodoo	
	attach a separate page with information about additional employers.	Employment status  Occupation	■ Not emplo				□ Not e	-		
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed th	nere?				_			
Par	t 2: Give Details About Mont	hly Income								
	mate monthly income as of the dat ss you are separated.	e you file this form. If yo	ou have nothing	to report for an	y line	e, write \$0	in the spa	ace. Includ	le your non-filir	ng spouse
•	u or your non-filing spouse have more ce, attach a separate sheet to this form		oine the informat	ion for all emplo	oyers	for that p	person on	the lines b	elow. If you ne	ed more
						For Deb	tor 1		btor 2 or ing spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca	,	, ,	2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly overting	ne pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add line	2 + line 3.		4.	\$		0.00	\$	N/A	

btor 1	Vicker, Carol Anne	_	Case r	number ( <i>if known</i> )			
			For	Debtor 1		ebtor 2 or ling spouse	
Cop	by line 4 here	4.	\$	0.00	\$	N/A	
List	all payroll deductions:						
5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
5e.	Insurance	5e.	\$	0.00	\$	N/A	
5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
5g.	Union dues	5g.	\$	0.00	\$	N/A	
5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A	
Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	0.00	\$	N/A	
Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A	
8b. 8c. 8d.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation	8a. 8b. 8c. 8d.	\$ \$ \$	0.00 0.00 0.00 0.00	\$ \$ \$	N/A N/A	
8e.	Social Security	8e.	<u>\$</u> —	861.00	\$	N/A	
8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: DPW Benefit Pension or retirement income Other monthly income. Specify:	8f. 8g. 8h.+	\$ \$	22.00 0.00 0.00	\$ \$ + \$	N/A N/A N/A	
م ۸	· · · · · · · · · · · · · · · · · · ·	_ _ ,	<u> </u>	1			
Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	<b>—</b>	883.00	\$	N/A	
. Cal	culate monthly income. Add line 7 + line 9.	10. \$		883.00 + \$		N/A = \$	883.
Ado	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L					
Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your dear friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not available.	ependen				e <i>J</i> . 11. <b>+</b> \$	0.

Schedule I: Your Income

13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain:

Official Form 106I

Combined monthly income

page 2

Fill	in this information to identify yo	ur case:				
Deb	tor 1 Carol Anne \	Vicker		Check	if this is:	
				. —	n amended filing	
	tor 2 buse, if filing)				supplement show spenses as of the f	ing postpetition chapter 13
(Opt	ouse, ii iiiiig)				spenses as or the i	ollowing date.
Unit	ed States Bankruptcy Court for the:	WESTERN DISTRICT OF PITTSBURGH DIVISION	,	M	IM / DD / YYYY	
1	e number nown)					
(11 10	iowii)					
Of	fficial Form 106J					
So	chedule J: Your E	Expenses				12/15
Be info	as complete and accurate as ormation. If more space is nee (nown). Answer every questio	possible. If two married pe eded, attach another sheet				
Par		hold				
1.	Is this a joint case?					
	■ No. Go to line 2.  ☐ Yes. <b>Does Debtor 2 live in</b>	n a separate household?				
	□ No					
	— · · · ·	st file Official Form 106J-2,E	kpenses for Separate House	eholdof Debtor 2	<u>.</u>	
2.	Do you have dependents?	■ No				
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information each dependent	•		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.					☐ Yes
						□ No
						☐ Yes
						□ No
						☐ Yes
						□ No
3.	Do your expenses include	_				☐ Yes
Э.	expenses of people other th yourself and your depender					
	t 2: Estimate Your Ongoir					
exp	imate your expenses as of yo enses as of a date after the b llicable date.					
Incl	ude expenses paid for with n	on-cash government assis	tance if you know the			
	ue of such assistance and hav	ve included it on Schedule	I: Your Income		Your expe	enses
(Oil	ficial Form 106l.)					
4.	The rental or home ownersh payments and any rent for the		lence. Include first mortgage	e 4. \$		1,100.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's,	or renter's insurance		4b. \$		0.00
		pair, and upkeep expenses		4c. \$		0.00
		on or condominium dues		4d. \$		0.00
5.	Additional mortgage payme	ents for your residence, suc	ch as home equity loans	5. \$		0.00

Debtor 1	Vicker, Carol Anne	Case num	ber (if known)	
S. Uti	lities:			
o. <b>Uti</b> 6a.		6a.	\$	125.00
6b.		6b.	\$	90.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
6d.		6d.	\$	0.00
	od and housekeeping supplies	7.	\$	150.00
	ildcare and children's education costs	8.	\$	0.00
	othing, laundry, and dry cleaning	9.	\$	
			\$	10.00
	rsonal care products and services	10.	·	10.00
	dical and dental expenses	11.	\$	10.00
	Insportation. Include gas, maintenance, bus or train fare.  not include car payments.	12.	\$	25.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	aritable contributions and religious donations	14.	·	0.00
	urance.			<u> </u>
	not include insurance deducted from your pay or included in lines 4 or 20.			
	a. Life insurance	15a.	\$	0.00
15	o. Health insurance	15b.	\$	0.00
150	c. Vehicle insurance	15c.	\$	30.00
150	d. Other insurance. Specify:	15d.	\$	0.00
3. <b>Ta</b> :	<b>xes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		-	
	ecify:	16.	\$	0.00
	tallment or lease payments:			
178	a. Car payments for Vehicle 1	17a.	\$	0.00
17	o. Car payments for Vehicle 2	17b.	\$	0.00
170	c. Other. Specify:	17c.	\$	0.00
170	d. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report as		•	0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	
	ner payments you make to support others who do not live with you.	40	\$	0.00
	ecify:	19.	ur Incomo	
	ner real property expenses not included in lines 4 or 5 of this form or on Sche a. Mortgages on other property	20a.		0.00
	b. Real estate taxes	20a. 20b.		0.00
		20c.	·	
	c. Property, homeowner's, or renter's insurance d. Maintenance, repair, and upkeep expenses	20d.	· -	0.00
			·	0.00
	e. Homeowner's association or condominium dues	20e.	\$	0.00
. Otl	ner: Specify:	21.	+\$	0.00
2. <b>C</b> a	culate your monthly expenses			
228	a. Add lines 4 through 21.		\$	1,750.00
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,750.00
				.,. 50.00
	Iculate your monthly net income.		•	
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	883.00
231	o. Copy your monthly expenses from line 22c above.	23b.	-\$	1,750.00
22/	c. Subtract your monthly expenses from your monthly income.			
230	The result is your <i>monthly net income</i> .	23c.	\$	-867.00
	The result is your monthly not income.			
For	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage?			or decrease because of a
	No.			
	Ves Explain here			

					•
Fill in this i	information to identify y	our case:			
Debtor 1	Carol Anne Vicke	er			
	First Name	Middle Name	Last Name		}
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Spouse II, IIIIIIg)	riist Name	Middle Name	Last Name		
United States B	sankruptcy Court for the:	WESTERN DISTRICT C DIVISION	OF PENNSYLVANIA, PITTSBU	RGH 	
Case number					
(if known)					Check if this is an amended filing
o#: : -	4000				
Official For	<u>m 106Dec</u>				
<b>Declara</b>	tion About a	an Individual	<b>Debtor's Sche</b>	edules	12/15
If two married p	eople are filing together	, both are equally respons	sible for supplying correct inf	ormation.	
obtaining mone		n connection with a bankr			ment, concealing property, or ), or imprisonment for up to 20
Sig	gn Below				
Did you pa	ay or agree to pay some	one who is NOT an attorn	ey to help you fill out bankruր	otcy forms?	
■ No					
☐ Yes.	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
					-,
	alty of perjury, I declare re true and correct.	that I have read the summ	ary and schedules filed with	this declaratio	n and
X /s/ Ca	rol Anne Vicker		Х		
	Anne Vicker		Signature of Debto	or 2	
Signati	ure of Debtor 1		-		

Date

Date **July 25, 2022** 

	Fill in this	s information to identi	fy your case:		i		
Debt	or 1	Carol Anne Vicke	er		1		
		First Name	Middle Name	Last Name			
Debt (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Ban	kruptcy Court for the:	WESTERN DISTRICT C	DF PENNSYLVANIA, PITTSBURGH			
Case	number						
(if know	wn)				[		c if this is an
					J	amen	ded filing
		m 106Sum	and Liabilities on	d Cartain Statistical Informa	4:		40/45
				d Certain Statistical Informate refiling together, both are equally responsite			12/15
inforr	nation. Fill o original form	ut all of your schedule	es first; then complete the	information on this form. If you are filing ar the box at the top of this page.			
						Your as Value o	ssets f what you own
		<b>B: Property</b> (Official Fo				\$	170,400.00
	1b. Copy line	e 62, Total personal pro	perty, from Schedule A/B			\$	10,100.00
	1c. Copy line	e 63, Total of all property	on Schedule A/B			\$	180,500.00
Part	2: Summa	rize Your Liabilities					
							abilities t you owe
			aims Secured by Property (omn AAmount of claim, at the	Official Form 106D) bottom of the last page of Part 1 of <i>Schedule D</i>	D	\$	367,958.00
			Unsecured Claims (Official Foundation of the Institute of	Form 106E/F) s) from line 6e <b>&amp;</b> chedule E/F		\$	0.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured cla	aims) from line 6j o <b>3</b> chedule E/F		\$	0.00
				Your total lia	bilities	\$	367,958.00
Part	3: Summa	arize Your Income and	Expenses		L		
		Your Income(Official Fo					000.00
						\$	883.00
5.	Copy your mo	Your Expenses (Official onthly expenses from lin	e 22c of <i>Schedule J</i>			\$	1,750.00
Part -	4: Answer	These Questions for	Administrative and Statis	tical Records			
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. Chec	ck this box and submit this form to the court with	ו your othe	er schedu	les.
7.	■ Yes What kind o	f debt do you have?					
				ebts are those "incurred by an individual primarily cal purposes. 28 U.S.C§ 159.	y for a per	·sonal, fan	nily, or household
				nothing to report on this part of the form. Check	k this box	and subn	nit this form to the
Offic	court wi al Form 1065	th your other schedules. Sum <b>Summary</b> (		ties and Certain Statistical Information		r	page 1 of 2

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

		ill in this	information to identi	fv vour case:					
Dα	btor 1		Carol Anne Vick						
	DIOI I		First Name	Middle Name		Last Name			
1 -	btor 2		First Name	Middle News		Last Name			
(Spi	ouse if,	filing)	FIRST Name	Middle Name		Last Name			
Un	ited S	states Ban	kruptcy Court for the:	WESTERN DISTRICT DIVISION	OF PEN	NSYLVANIA, PITTSB	URGH		
	se nu nown)	mber						_	heck if this is an nended filing
St	ate	ment	nd accurate as possib	Affairs for Indiv	are filing	g together, both are e	qually responsible for		
			r every question.	attach a separate sheet to	this for	m. On the top of any	additional pages, writ	e your n	ame and case number
Pa	rt 1:	Give D	etails About Your Ma	rital Status and Where Yo	u Lived	Before			
1.	Wha	at is your	current marital status	s?					
	П	Married							
		Not marr	ried						
2.	Duri			ived anywhere other thar	n where	you live now?			
		No							
			all of the places you liv	ed in the last 3 years. Do no	ot include	where you live now.			
	Del	otor 1:		Dates Debtor there	1 lived	Debtor 2 Prior Ac	Idress:		Dates Debtor 2 lived there
3. stat				er live with a spouse or le fornia, Idaho, Louisiana, N					
		No							
			ke sure you fill out Sche	edule H: Your Codebtors (O	fficial Fo	rm 106H).			
Pa	rt 2	Explair	the Sources of Your	Income					
4.	Fill i	n the total	amount of income you	ployment or from operati u received from all jobs and ave income that you receive	d all busi	nesses, including part-	time activities.	calenda	ar years?
		No							
			in the details.						
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(be	oss income fore deductions and clusions)	Sources of income Check all that apply		Gross income (before deductions and exclusions)

5.	Include income other public be	id you receive any other income during this year or the two previous calendar years?  Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and ther public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If ou are filing a joint case and you have income that you received together, list it only once under Debtor 1.										
	List each source	e and th	e gross incon	ne from each	n source separate	ely. Do no	t include income	that you	ı listed in line 4.			
	■ No □ Yes. Fill i	n the de	tails.									
				Debtor 1 Sources o Describe b		each (befo	ss income from a source pre deductions ar usions)	;	Debtor 2 Sources of inc Describe below		Gross income (before deduction and exclusions)	ıs
Pa	rt 3: List Cer	tain Pay	ments You	Made Befor	e You Filed for	Bankrup	tcy					
6.	□ No. Ne ind □ Du □ □ □  * *	ither De ividual p ring the s l No. l Yes Subject t	btor 1 nor Derimarily for a property of the pr	ebtor 2 has bersonal, fan e you filed fo ach creditor not include an attorney on 4/01/25 a both have e you filed fo ach creditor ach creditor or domestic s	nily, or household or bankruptcy, did to whom you paid payments for do for this bankrupt and every 3 years primarily consu or bankruptcy, did to whom you paid	d you pay d a total of the that d you pay d a total of the that d you pay d a total of the that d you pay d a total of	any creditor a tole of \$7,575* or more upport obligation at for cases filed costs.  any creditor a tole of \$600 or more a	e in one s, such on or after tal of \$60 and the to	575* or more? or more payme as child suppor er the date of ac	nts and the tot t and alimony justment.	as "incurred by an all amount you paid Also, do not includitor. Do not include nents to an attorney	that de
	Creditor's Na	me and	Address		Dates of paym	ent	Total amour		Amount you still owe	Was this p	ayment for	
7.	Insiders include which you are a business you co	e your re an office perate a	latives; any ge r, director, per	eneral partnerson in contrietor. 11 U.S	ol, or owner of 20	ny genera 0% or mo	nt on a debt you ll partners; partners re of their voting	u owed erships o securitie	of which you are s; and any man	a general par aging agent, i	r? rtner; corporations c ncluding one for a oport and alimony.	of
	Insider's Nan	ne and A	Address		Dates of paym	ent	Total amour pai		Amount you still owe	Reason for	this payment	
8.	insider? Include payment	nts on de		ed or cosign	, <b>did you make</b> ed by an insider.	any payı	ments or transfe	er any p	property on ac	count of a de	bt that benefited a	an
	Insider's Nan	ne and A	Address		Dates of paym	ent	Total amour		Amount you still owe		r this payment ditor's name	
Pa	rt 4: Identify	l egal A	ctions. Ren	ossessions	, and Foreclosu	res	pai	u	Sun owe	molude cre	uitui s Hailie	

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications,

	and contract disputes.				
	□ No				
	Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency	Status of	the case
	Freedon Mortgage vs. Carol A. Vicker MG-19-000503	Mortgage foreclosure action.	Allegheny County Com Pleas	mon ■ Pendii □ On ap □ Conclu	peal
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		rty repossessed, foreclosed, ç	garnished, attached	d, seized, or levied?
	No. Go to line 11.				
	☐ Yes. Fill in the information below.				
	Creditor Name and Address	Date	Value of the		
			property		
11.	<ul> <li>Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>				
	Creditor Name and Address	Date action was taken	Amount		
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an  ■ No □ Yes		rty in the possession of an as	signee for the bene	efit of creditors, a
Par	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrupt  ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts	with a total value of more tha	nn \$600 per person	?
	Gifts with a total value of more than \$600 person	er Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
<ul> <li>Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any one of the second process.</li> <li>No</li> <li>□ Yes. Fill in the details for each gift or contribution.</li> </ul>				\$600 to any charity?	
	Gifts or contributions to charities that tota more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you	contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Del	otor 1 Vicker, Carol Anne		Ca	ase number(	if known)	
	or gambling?					
	■ No □ Yes. Fill in the details.					
	how the loss occurred	Include	be any insurance coverage for the lose the amount that insurance has paid. List ace claims on line 33 of Schedule A/B: Pro	st pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	mourar	iso siamio sii mio so siconogalo 142. 111	oporty.		
	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or pr Include any attorneys, bankruptcy petition prep	eparin	g a bankruptcy petition?			y to anyone you
	☐ No ■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any proper transferred	ty	Date payment or transfer was made	Amount of payment
	Schimizzi Law, LLC 35 West Pittsburgh Street Greensburg, PA 15601		0.00			\$0.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your credit Do not include any payment or transfer that you No Yes. Fill in the details.	tors or	to make payments to your creditors? on line 16.			
	Person Who Was Paid Address		Description and value of any proper transferred	ty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your Include both outright transfers and transfers in gifts and transfers that you have already listed No  Yes. Fill in the details.	<b>busine</b> nade as	ess or financial affairs? security (such as the granting of a securi			
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankry beneficiary? (These are often called asset-p. No ☐ Yes. Fill in the details.			-settled trus	st or similar device of	which you are a
	Name of trust		Description and value of the propert	ty transferre	ed	Date Transfer was

Par	tt 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit Be	oxes, and Stora	ge Units							
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.										
	■ No □ Yes. Fill in the details.										
		ast 4 digits of ccount number	Type of accour instrument	nt or	Date account was closed, sold, moved, or transferred	Last balance closing or to					
21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for ba	ankruptcy, any	safe depo	sit box or other deposi	tory for securiti	es,				
	No										
	Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acces Address (Number, Stre and ZIP Code)		Describe 1	the contents	Do you st have it?	ill				
22.	Have you stored property in a storage unit or pl	ace other than your he	ome within 1 ye	ar before	you filed for bankruptc	y?					
	■ No	■ No									
	Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe (	the contents	Do you st have it?	ill				
Par	t 9: Identify Property You Hold or Control for	Someone Else									
23.	Do you hold or control any property that someosomeone.	one else owns? Include	any property y	ou borro	wed from, are storing fo	or, or hold in tru	ust for				
	■ No □ Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, Sta		Describe t	the property		Value				
Par	rt 10: Give Details About Environmental Informa	Code)									
	the purpose of Part 10, the following definitions										
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai controlling the cleanup of these substances, wastes,	r, land, soil, surface w	-								
	Site means any location, facility, or property as own, operate, or utilize it, including disposal sit	defined under any env	rironmental law	, whether	you now own, operate,	or utilize it or u	ised to				
	Hazardous material means anything an environ material, pollutant, contaminant, or similar term		a hazardous wa	ste, haza	rdous substance, toxic	substance, haz	ardous				
Rep	ort all notices, releases, and proceedings that yo	ou know about, regard	ess of when the	ey occurr	ed.						
24.	Has any governmental unit notified you that you	u may be liable or pote	ntially liable un	nder or in	violation of an environr	mental law?					
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit	eet, City, State and	Enviro know	onmental law, if you it	Date of no	otice				

De	btor 1	Vicker, Carol Anne		Cas	se number (if known)					
			_							
25.	Have	you notified any governmental unit of	any release of hazardous material?							
		No								
		Yes. Fill in the details.								
		ne of site  ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice				
26.	Have	you been a party in any judicial or adn	ninistrative proceeding under any enviro	onme	ental law? Include settlements an	d orders.				
	_	No Yes. Fill in the details.								
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case				
Pa	rt 11:	Give Details About Your Business or	Connections to Any Business							
27.	With	in 4 years before you filed for bankrupt	cy, did you own a business or have any	of th	ne following connections to any b	ousiness?				
		☐ A sole proprietor or self-employed i	n a trade, profession, or other activity, e	either	full-time or part-time					
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
		☐ A partner in a partnership								
		☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation									
		No. None of the above applies. Go to F	Part 12.							
		Yes. Check all that apply above and fill in the details below for each business.								
	Business Name		Describe the nature of the business		Employer Identification number					
		Iress ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN.					
					Dates business existed					
28.		in 2 years before you filed for bankrupt tutions, creditors, or other parties.	cy, did you give a financial statement to	any	one about your business? Includ	le all financial				
		No								
		Yes. Fill in the details below.								
		ne Iress ber, Street, City, State and ZIP Code)	Date Issued							
Pa	rt 12:	Sign Below								
true ban 18 U	and of krupto J.S.C.	correct. I understand that making a false by case can result in fines up to \$250,00 §§ 152, 1341, 1519, and 3571.	ancial Affairs and any attachments, and e statement, concealing property, or obt	tainir	ng money or property by fraud in					
		nne Vicker e of Debtor 1	Signature of Debtor 2							
Dat		uly 25, 2022	Date							
		•	nt of Financial Affairs for Individuals Fil	ling f	or Bankruptcy (Official Form 107)	)?				
<b>=</b> N										
	es/									
<b>I</b>	, 10		an attorney to help you fill out bankrup	•						
	es. Na	ame of Person Attach the Bankru	ptcy Petition Preparer's Notice, Declaration	, and	Signature (Official Form 119).					
Offic	ial Forn	m 107 Staten	nent of Financial Affairs for Individuals Filing	ı for P	Rankruntev	nage <b>f</b>				

=::::::::::::::::::::::::::::::::::::::				
	is information to identif	y your case:		
Debtor 1	Carol Anne Vicke	Middle Name	Last Name	\
Debtor 2	. not riame	illiadio Haille	243.114.110	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	WESTERN DIST	RICT OF PENNSYLVANIA, PITTSBURGH	
Case number				
(if known)				Check if this is an amended filing
Official Fo	rm 108			
		n for Indi	viduals Filing Under Char	ntor 7
Statemen	it of intentio	n for mar	viduals Filing Under Cha	pter / 12/15
If you are an indi	vidual filing under chap	ster 7 vou must fill	out this form if	
	e claims secured by you	-	out this form in.	
	ed personal property a		ot expired.	
You must file this	s form with the court wi ver is earlier, unless the	thin 30 days after y	you file your bankruptcy petition or by the date a e time for cause. You must also send copies to t	
If two married pe		in a joint case, bot	h are equally responsible for supplying correct	information. Both debtors must sign
	and accurate as possible our name and case num		needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims		
information be	elow.		Creditors Who Have Claims Secured by Proper	
Identify the cre	editor and the property th	at is collateral	What do you intend to do with the property the secures a debt?	hat Did you claim the property as exempt on Schedule C?
Creditor's <b>F</b>	reedom Mortgage		☐ Surrender the property.	■ No
name:			Retain the property and redeem it.	_
Description of	3030 Hillcrest Rd,	Bethel Park.	☐ Retain the property and enter into a <i>Reaffirma</i> Agreement.	tion
property	PA 15102-1210	,	Retain the property and [explain]:	
securing debt:			Retain and pay pursuant to contract	
Day 0 Harry				
	our Unexpired Personal ed personal property lea		in Schedule G: Executory Contracts and Unexpi	red Leases (Official Form 106G), fill in
the information b	pelow. Do not list real es	state leases. Unexp	pired leases are leases that are still in effect; the	
may assume an i	unexpired personai proj	perty lease if the tr	ustee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe your u	nexpired personal prop	erty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea	sed			□ NO
Property:				☐ Yes
Lessor's name:				□ Na
Lessor's name: Description of lea	sed			□ No
Property:				☐ Yes

Official Form 108

Debtor 1 Vicker, Carol Anne	Case number (if known)
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention property that is subject to an unexpired lease.	about any property of my estate that secures a debt and any personal
X /s/ Carol Anne Vicker	X
Carol Anne Vicker Signature of Debtor 1	Signature of Debtor 2
Date <b>July 25, 2022</b>	Date

Fill in this information to identify your case:	Check one box only as directed in this form and in Form 122A-1Supp:
Debtor 1 Carol Anne Vicker	122A-13upp.
Debtor 2 (Spouse, if filing)	1. There is no presumption of abuse
United States Bankruptcy Court for the:  Western District of Pennsylvania, Pittsburgh Division	☐ 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
Case number (if known)	3. The Means Test does not apply now because of qualified military service but it could apply later.
	☐ Check if this is an amended filing
Official Form 122A - 1	
<b>Chapter 7 Statement of Your Current Mor</b>	nthly Income 12/19
a separate sheet to this form. Include the line number to which the additional info	buse because you do not have primarily consumer debts or because of qualifying
What is your marital and filing status? Check one only.	
■ Not married. Fill out Column A, lines 2-11.	
☐ Married and your spouse is filing with you. Fill out both Columns	s A and B, lines 2-11.
☐ Married and your spouse is NOT filing with you. You and your s	spouse are:
☐ Living in the same household and are not legally separated. F	Fill out both Columns A and B, lines 2-11.
	ines 2-11; do not fill out Column B. By checking this box, you declare under under nonbankruptcy law that applies or that you and your spouse are living irrements. 11 U.S.C § 707(b)(7)(B).
Fill in the average monthly income that you received from all sources, derived 101(10A). For example, if you are filing on September 15, the 6-month period would 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. own the same rental property, put the income from that property in one column only	d be March 1 through August 31. If the amount of your monthly income varied during the t. Do not include any income amount more than once. For example, if both spouses
	Column A  Debtor 1  Debtor 2 or  non-filing spouse
Your gross wages, salary, tips, bonuses, overtime, and commissio payroll deductions).	ons (before all \$\$
Alimony and maintenance payments. Do not include payments from a Column B is filled in.	\$
4. All amounts from any source which are regularly paid for household of you or your dependents, including child support. Include regular from an unmarried partner, members of your household, your dependents roommates. Include regular contributions from a spouse only if Column Do not include payments you listed on line 3	r contributions
5. Net income from operating a business, profession, or farm	
0.00	ebtor 1
Gross receipts (before all deductions) \$\frac{0.00}{0.00}\$	=
Cramery and recessary operating expenses	Copy here -> \$ 0.00 \$
6. Net income from rental and other real property  Del	ebtor 1
Gross receipts (before all deductions) \$ 0.00	
Ordinary and necessary operating expenses -\$ 0.00	_
	Copy here -> \$ \$
7. Interest, dividends, and royalties	\$ 0.00 \$

	Vicker, Carol Anne		Ca	se number (if kr	nown)		
				umn A otor 1		Column B Debtor 2 o	
8. Uner	mployment compensation		\$	0.	.00	\$	
Socia	not enter the amount if you contend that the amo ial Security Act. Instead, list it here:		nder the				
Fo	or you or your spouse	\$0.0	00_				
Fo	or your spouse	\$					
9. Pens unde inclu Gove a me 61 of of ret	sion or retirement income. Do not include any er the Social Security Act. Also, except as stated ude any compensation, pension, pay, annuity, or ernment in connection with a disability, combat- ember of the uniformed services. If you received if title 10, then include that pay only to the extent etired pay to which you would otherwise be entitle 10 other than chapter 61 of that title.	y amount received that was a d in the next sentence, do not allowance paid by the United related injury or disability, or of any retired pay paid under clean that it does not exceed the allowers.	t I States death of hapter mount	0.	.00	\$_	
10. Incor Do no as a terror State death	ome from all other sources not listed above. not include any benefits received under the Social victim of a war crime, a crime against humanity orism; or compensation pension, pay, annuity, or es Government in connection with a disability, or h of a member of the uniformed services. If necestate page and put the total below.	al Security Act; payments rec , or international or domestic r allowance paid by the Unite ombat-related injury or disabil	eived d lity, or				
	·		\$	0.	.00	\$	
			\$	0.	.00	\$	
	Total amounts from separate pages, if any.		+ \$	0.	.00	\$	
	culate your total current monthly income. Ac		\$	0.00 +	\$		\$ 0.00
Down Or	Determine Whather the Means Test Appli		<b>\$</b>	0.00			Total current monthly income
Part 2:	Determine Whether the Means Test Appli	ies to You	\$	0.00			Total current monthly
12. <b>Calc</b>	culate your current monthly income for the y	ies to You year. Follow these steps:			·		Total current monthly income
12. <b>Calc</b>		ies to You year. Follow these steps:			·	9re=>	Total current monthly
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X /s/ Carol Anne Vicker

Carol Anne Vicker

Signature of Debtor 1

Date **July 25, 2022** 

Debtor 1	Vicker, Carol Anne	Case number (if known)	n)		
	MM/DD/YYYY				
	If you checked line 14a, do NOT fill out or file Form 122A-2.				
	If you checked line 14h, fill out Form 122A-2 and file it with this form	n			

Certificate Number: 12459-PAW-CC-036675128



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on <u>July 11, 2022</u>, at <u>11:04</u> o'clock <u>AM PDT</u>, <u>Carol Vicker</u> received from <u>Abacus Credit Counseling</u>, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the <u>Western District of Pennsylvania</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by telephone.

Date: July 11, 2022

By: /s/Shannon Cooper

Name: Shannon Cooper

Title:

Credit Counselor

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

# United States Bankruptcy Court Western District of Pennsylvania, Pittsburgh Division

In re	Vicker, Carol Anne	•	Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSA	ATION OF ATTO	RNEY FOR I	DEBTOR	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in	ne petition in bankruptcy,	or agreed to be pai	d to me, for services	
	For legal services, I have agreed to accept		\$	1,800.00	
	Prior to the filing of this statement I have received			1,800.00	
	Balance Due		\$	0.00	
2. Т	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. Т	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. l	I have not agreed to share the above-disclosed compensation firm.	on with any other person	unless they are mer	mbers and associates	of my law
ļ	☐ I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of				law firm. A
5. ]	In return for the above-disclosed fee, I have agreed to render le	egal service for all aspects	s of the bankruptcy	case, including:	
t c	<ul> <li>Analysis of the debtor's financial situation, and rendering ac</li> <li>Preparation and filing of any petition, schedules, statement</li> <li>Representation of the debtor at the meeting of creditors and</li> <li>[Other provisions as needed]</li> </ul>	of affairs and plan which	may be required;	•	ıkruptcy;
6. I	By agreement with the debtor(s), the above-disclosed fee does Representation in adversary proceedings and				
		TIFICATION			
	certify that the foregoing is a complete statement of any agree ankruptcy proceeding.	ement or arrangement for	payment to me for	representation of the	debtor(s) in
Jı	ıly 25, 2022	/s/ Richard W. Sch	imizzi		
	ate	Richard W. Schim Signature of Attorney Schimizzi Law, LL	izzi		
		35 West Pittsburgl Greensburg, PA 1 (724) 838-9722 Fa rws@schimizzilaw Name of law firm	5601 ax: (724) 837-786	8	
		Traine of this juin			